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				angela	² /m	. Poss	(Signature)
				January	6	2009	(Detr)
APPLICATION NO	FILING DATE	: 1	FIRST NAMED INVEN	TOR	ATTORN	EY DOCKET NO.	CONFIRMATION NO.
10/517,419	12/08/2004		Patrice Martinez		41	052/309048	2579
TLE OF INVENTION	: PROTECTIVE HEAD	GEAR EQUIPMENT W]	ITH RESPIRATIOR A RESPIRATOR	ND OPTICAL SHIEL	D		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE	IOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$ 1510	\$300	\$0		\$1810	01/07/2009
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
MATTER, KRISTEN CLARETTE		3771	128-201220				
Change of correspond R 1.363).	ence address or indication	n of "Fee Address" (37		e patent front page, lis		ı Denn W.	. Russell
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively. Kristin M. Crall				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. (2) the name of a single firm (having as a member a registered attorneys or agents. If no name is 3 Kilpatrick Stockton listed, no name will be printed.				cick Stockton L
ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or	type)			
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The following fee(s) a	re submitted:	46	. Payment of Fee(s): (P		y previous	ily paid issue fee si	nown above)
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